Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW MEXICO		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Kyley First name C. Middle name Hernandez Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
	maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2156	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs. Business name(s)			
	Include trade names and doing business as names	Business name(s)				
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		3251 Tin Cup Rd. NE Rio Rancho, NM 87144				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Sandoval County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

7.	The chapter of the Bankruptcy Code you are			orief description of each go to the top of page 1			C. § 342(b) for Individu	uals Filing for Bankruptcy		
	choosing to file under	■ Chapter 7								
		☐ Cha	pter 11							
		☐ Chapter 12								
		☐ Cha	pter 13							
8.	How you will pay the fee	a o	bout how yo	u may pay. Typically, if attorney is submitting y	you are paying	the fee yourself,	you may pay with cash	r local court for more details a, cashier's check, or money a credit card or check with		
				the fee in installmen e in Installments (Offici		e this option, sign	and attach the Applica	ation for Individuals to Pay		
			•	,	•	this option only if	you are filing for Char	oter 7. By law, a judge may,		
		b a	ut is not req pplies to you	uired to, waive your fee	e, and may do so are unable to pay	only if your incor the fee in install	me is less than 150% oments). If you choose	of the official poverty line that this option, you must fill out		
9.	Have you filed for bankruptcy within the	□ No.								
	last 8 years?	Yes.								
			District	New Mexico	When	5/05/10	Case number	10-12315		
			District		When		Case number			
			District		When		Case number			
10.	Are any bankruptcy cases pending or being	■ No								
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.								
			Debtor				Relationship to y	ou		
			District		When		Case number, if	known		
			Debtor				Relationship to y			
			District		When		Case number, if	known		
11.	Do you rent your residence?	■ No.	Go to I	ine 12.						
	residence:	☐ Yes.	Has yo	ur landlord obtained ar	eviction judgm	ent against you?				
				No. Go to line 12.						
							ent Against You (Form			

Case number (if known)

Debtor 1 Kyley C. Hernandez

Deb	otor 1 Kyley C. Hernande	ez		Case number (if known)
Par	t 3: Report About Any Bu	einossos	You Own as a Sole Propri	ntor
		311103303	Tou Own as a sole i Toph	GLOI
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bu	usiness
	A sole proprietorship is a			
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	<i>(</i>
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, St	ate & ZIP Code
	it to this petition.		Check the appropriate b	ox to describe your business:
			☐ Health Care Bus	iness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Re	al Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))
			☐ Commodity Brok	rer (as defined in 11 U.S.C. § 101(6))
			☐ None of the abo	ve
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you indicate that you are ns, cash-flow statement, and s.C. 1116(1)(B).	e court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am not filing under Cha	apter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapte Code.	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapte	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
D	Daniel W.V. and O.		. III B	Provide That No. de laure Mate Attach
	•	Have Any	/ Hazardous Property or A	ny Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is	■ No.		
	alleged to pose a threat	☐ Yes.	NA	
	of imminent and identifiable hazard to		What is the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
	•			Number, Street, City, State & Zip Code

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

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counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Kyley C. Hernande	ez		Case number	er (if known)		
Par	t 6: Answer These Questi	ons for R	eporting Purposes				
16.	What kind of debts do you have?	16a.		onsumer debts? Consumer debts are defisonal, family, or household purpose."	ined in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you o	owe that are not consumer debts or busines	ss debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	r 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?				
	administrative expenses		■ No				
	are paid that funds will be available for		□Yes				
	distribution to unsecured creditors?						
18.	How many Creditors do	1 -49		1 ,000-5,000	1 25,001-50,000		
	you estimate that you owe?	□ 50-99		<u> </u>	<u></u> 50,001-100,000		
		□ 100-1 □ 200-9		□ 10,001-25,000	☐ More than100,000		
19.	How much do you ☐ \$0		50,000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion		
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.	How much do you	□ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion		
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion		
Par	t 7: Sign Below						
For	you	I have ex	amined this petition, and I de	clare under penalty of perjury that the infor	mation provided is true and correct.		
				7, I am aware that I may proceed, if eligible relief available under each chapter, and I ch			
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		bankrupt and 3571	cy case can result in fines up	t, concealing property, or obtaining money of to \$250,000, or imprisonment for up to 20 y	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		Kyley C	y C. Hernandez C. Hernandez e of Debtor 1	Signature of Debto	or 2		
		Executed	d on May 16, 2019	Executed on			
			MM / DD / YYYY	MN	I / DD / YYYY		

Debtor 1 Kyley C. Hernand	lez	Case number (if known)			
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unit	ed States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)		
If you are not represented by	and, in a case in which § 707(b)(4)(D) applies	s, certify that I have no know	vledge after an inquiry that the information in the		
an attorney, you do not need to file this page.	schedules filed with the petition is incorrect.				
	/s/ Matthew Gandert	Date	May 16, 2019		
	Signature of Attorney for Debtor		MM / DD / YYYY		
	Matthew Gandert				
	Printed name				
	Affordable Law PC				
	Firm name				
	1128 Pennsylvania St. NE				
	Suite 210				
	Albuquerque, NM 87110				
	Number, Street, City, State & ZIP Code				
	Contact phone 505-255-4859	Email address			

NM Bar number & State

Fill	in this informa	ation to identify your	case:			
	otor 1	Kyley C. Hernand				
Det	otor 2	First Name	Middle Name	Last Name		
	use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Bank	cruptcy Court for the:	DISTRICT OF NEW ME	XICO		
(if kn	own)					k if this is an ided filing
						g
Of	ficial For	m 106Sum				
			and Liabilities an	d Certain Statistical Information	1	12/15
info	rmation. Fill our original forms	it all of your schedule	es first; then complete th	are filing together, both are equally responsible e information on this form. If you are filing ament the box at the top of this page.		
ı aı	Julillian	ize rour Assets			v	
					Your a	of what you own
1.	Schedule A/E	3: Property (Official Fo	orm 106A/B)		c	165,368.00
						·
	1b. Copy line	62, Total personal prop	perty, from Schedule A/B		. \$	45,182.00
	1c. Copy line	63, Total of all property	on Schedule A/B		\$	210,550.00
Par	t 2: Summar	ize Your Liabilities				
						iabilities nt you owe
2.			aims Secured by Property nn A, Amount of claim, at t	(Official Form 106D) he bottom of the last page of Part 1 of Schedule D.	\$	183,921.00
3.			Unsecured Claims (Official 1 (priority unsecured claim	Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	. \$	0.00
				aims) from line 6j of <i>Schedule E/F</i>		38,966.00
	ob. copy the	total olalino nom r art z	- (nonphonty unocoured of	aunio, nom inic oj di <i>concaute D1</i>	·	30,300.00
				Your total liabilitie	es \$	222,887.00
Par	t 3: Summar	ize Your Income and	Expenses			
4.		our Income (Official Fo		I	\$	2,049.00
5.		our Expenses (Official onthly expenses from lin			\$	2,462.00
Par	t 4: Answer	These Questions for	Administrative and Stati	stical Records		
6.	, ,		er Chapters 7, 11, or 13? on this part of the form. Ch	neck this box and submit this form to the court with	your other so	hedules.
	Yes					
7.	What kind of	debt do you have?				
				lebts are those "incurred by an individual primarily for statistical purposes. 28 U.S.C. § 159.	or a persona	, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. *Check this box* and submit this form to the court with your other schedules.

page 1 of 2

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,007.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

		our case and th	<u> </u>				
Debtor 1	Kyley C. Herna First Name	andez Middle	Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle	Name	Last Name			
United States	Bankruptcy Court for th	e: DISTRICT	OF NEW MEXICO				
Case number				_			Check if this is an amended filing
Official F	Form 106A/B						
_	ule A/B: Pro	pertv					12/15
hink it fits best	. Be as complete and ac nore space is needed, att	curate as possible	e. If two married peop	an asset fits in more than on le are filing together, both are he top of any additional page	e equally responsible t	or suppl	lying correct
Part 1: Descri	ibe Each Residence, Buil	ding, Land, or Otl	her Real Estate You C	wn or Have an Interest In			
□ No. Go to	Part 2.	iable interest in a	ny residence, buildin	g, land, or similar property?			
Yes. Whe	re is the property?						
1.1 _ 3251 Ti i	n Cup Rd. NE	ntion	Single-family				s or exemptions. Put
1.1 3251 Ti i		otion	Single-family Duplex or m		the amount of any se	ecured cl	s or exemptions. Put laims on Schedule D: Secured by Property.
1.1 3251 Til Street addre	n Cup Rd. NE ess, if available, or other descrip	87144-0000	Single-family Duplex or m Condominium Manufacture Land	whome ulti-unit building m or cooperative d or mobile home	the amount of any si Creditors Who Have Current value of th entire property?	ecured cl e Claims (e C	aims on Schedule D: Secured by Property. Current value of the portion you own?
1.1 3251 Tir Street addre	n Cup Rd. NE ess, if available, or other descri		Single-family Duplex or m Condominium Manufacture	whome ulti-unit building m or cooperative d or mobile home	Current value of the entire property? \$165,368. Describe the nature (such as fee simple)	e Claims of Clai	laims on Schedule D: Secured by Property. Current value of the portion you own? \$165,368.00 r ownership interest
3251 Tir Street addres	n Cup Rd. NE ess, if available, or other descrip	87144-0000	Single-family Duplex or mi Condominium Manufacture Land Investment p Timeshare Other Who has an intered Debtor 1 onl	w home ulti-unit building m or cooperative d or mobile home property st in the property? Check one	Current value of the entire property? \$165,368.	e Claims of Clai	laims on Schedule D: Secured by Property. Current value of the portion you own? \$165,368.00 r ownership interest
1.1 3251 Til Street addre	n Cup Rd. NE ess, if available, or other descrip	87144-0000	Single-family Duplex or mi Condominium Manufacture Land Investment p Timeshare Other Who has an intered Debtor 1 onl Debtor 2 onl At least one	w home ulti-unit building m or cooperative d or mobile home property st in the property? Check one y y d Debtor 2 only of the debtors and another	current value of the entire property? \$165,368. Describe the nature (such as fee simple a life estate), if known is the control of the contr	ecured cl e Claims s e Claims s e Cp p 00 e of your e, tenance wn.	laims on Schedule D: Secured by Property. Current value of the portion you own? \$165,368.00 It ownership interest by by the entireties, or
3251 Tin Street addre	n Cup Rd. NE ess, if available, or other descrip	87144-0000	Single-family Duplex or mi Condominium Manufacture Land Investment p Timeshare Other Who has an intered Debtor 1 onl Debtor 2 onl At least one	whome ulti-unit building m or cooperative d or mobile home property st in the property? Check one y d Debtor 2 only of the debtors and another you wish to add about this ite	current value of the entire property? \$165,368. Describe the nature (such as fee simple a life estate), if known is the control of the contr	ecured cl e Claims s e Claims s e Cp p 00 e of your e, tenance wn.	laims on Schedule D: Secured by Property. Current value of the portion you own? \$165,368.00 It ownership interest by by the entireties, or
3251 Tin Street addre	n Cup Rd. NE ess, if available, or other descrip	87144-0000	Single-family Duplex or mi Condominium Manufacture Land Investment p Timeshare Other Who has an intered Debtor 1 onl Debtor 2 onl At least one Other information	w home ulti-unit building m or cooperative d or mobile home property st in the property? Check one y y d Debtor 2 only of the debtors and another you wish to add about this ite tion number:	current value of the entire property? \$165,368. Describe the nature (such as fee simple a life estate), if known is the control of the contr	ecured cl e Claims s e Claims s e Cp p 00 e of your e, tenance wn.	laims on Schedule D: Secured by Property. Current value of the portion you own? \$165,368.00 It ownership interest by by the entireties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Det	otor i 📉	yley C. Hei	nandez		Case number (if known)		
3. C	ars, vans,	trucks, trac	tors, sport utility ve	hicles, motorcycles			
_		•	,	•			
_] No ■ v						
-	Yes						
3.′	1 Make:	Nissan		Who has an interest in the property? Cheek are	Do not deduct see	cured claims or exer	mptions. Put
Э.		Rogue		Who has an interest in the property? Check one	the amount of any	y secured claims on ave Claims Secured	Schedule D:
	Model: Year:	2016		■ Debtor 1 only □ Debtor 2 only			
		nate mileage:	30,512	Debtor 1 and Debtor 2 only	Current value of entire property?		alue of the ou own?
		formation:		☐ At least one of the debtors and another			
		ge conditio	n per	_	\$10.10	1.00	¢40 404 00
	edmur	ds.com		LI Check if this is community property (see instructions)	\$10,19°		\$10,191.00
				nd other recreational vehicles, other vehicles			
E	<i>xamples:</i> B	oats, trailers,	motors, personal wa	atercraft, fishing vessels, snowmobiles, motorcy	cle accessories		
	No						
	■ NO] Yes						
_	ı yes						
5 /	Add the do	ollar value of	the portion you ow	n for all of your entries from Part 2, includin	ng any entries for		
				that number here		\$1	0,191.00
			nal and Household It				
Do	you own o	or have any I	egal or equitable in	terest in any of the following items?		Current va	
						Do not ded	uct secured
6 L	lousabold	goods and f	urnichinge			claims or ex	xemptions.
			urnishings ices, furniture, linens	, china, kitchenware			
	⊐ No [′]	,					
ı	Yes. De	scribe					
			Haysahald ass	do and furnishings			\$2,000.00
			Household goo	ds and furnishings			\$Z,000.00
	Electronics		nd radios: audio, vid	eo, stereo, and digital equipment; computers, p	vrintere ecannere: mueic	collections: electro	onic devices
				eo, stereo, and digital equipment, computers, p nedia players, games	millers, scariners, music (Jollections, electro	Jilic devices
	□No			, ,			
ı	Yes. De	scribe					
							¢c00.00
			Electronics				\$600.00
	Collectibles		figurings: paintings	prints, or other artwork; books, pictures, or other	or art objects: stamp, coin	or basaball card	collections:
			ons, memorabilia, co		er art objects, stamp, com	, or baseban card	Collections,
ı	No						
	☐ Yes. De	scribe					
o F	auinment	for sports a	nd habbies				
				nd other hobby equipment; bicycles, pool tables	s, golf clubs, skis; canoes	and kayaks; carp	entry tools;
	•	musical instr	• .	• • • • • • • • • • • • • • • • • • • •	•		
_	No						
	☐ Yes. De	scribe					
10.	Firearms						
	Examples	: Pistols, rifle:	s, shotguns, ammuni	tion, and related equipment			
ı	No						

Official Form 106A/B Schedule A/B: Property page 2

Debte	or 1	Kyley C. Her	nandez		Case number	(if known)
	Yes.	Describe				
11. C	lothes	s				
		oles: Everyday cl	othes, fur	s, leather coats, designer	wear, shoes, accessories	
	No	Describe				
_	res.	Describe				
			Clothi	ng		\$200.00
	ewelry Examp		welry, cos	stume iewelry, engageme	nt rings, wedding rings, heirloom jewelry, watche	s. gems. gold. silver
	No		,,	name jeneny, engageme		o, goe, go.a, ee.
	Yes.	Describe				
			Jewel	TV		\$100.00
			Jewen	у		
13 N	on-fai	rm animals				
		oles: Dogs, cats,	birds, hor	ses		
	No					
	Yes.	Describe				
			A cat;	no value		\$0.00
14. A	ny otł	her personal an	d housel	nold items you did not a	ready list, including any health aids you did i	not list
	No	•		•		
	Yes.	Give specific inf	ormation.			
					including any entries for pages you have atta	sched \$2,000,00
	for Pa	art 3. Write that	number l	nere		\$2,900.00
		scribe Your Finan			(1)	
Do у	ou ow	vn or have any l	egal or e	quitable interest in any o	of the following?	Current value of the portion you own?
						Do not deduct secured
						claims or exemptions.
16. C					Contrary Character has during the	
_	=xamp No	oles: Money you	nave in yo	our wallet, in your nome, i	n a safe deposit box, and on hand when you file	your petition
		its of money oles: Checking, s	avings, o	other financial accounts;	certificates of deposit; shares in credit unions, b	rokerage houses, and other similar
					the same institution, list each.	
	No				Institution name:	
	Yes					
			17.1.	Savings Account as of 5/14/19	State Employees Credit Union (joint wi Floyd Smith)	th \$50.00
				Kasasa Cash Back		
			17.0	Saver Account as	State Employees Credit Union (joint wi Floyd Smith)	th \$10.00
			17.2.	of 5/14/19	1 loya Gillian	φ10.00
				Kasasa Cash Back	State Employees Credit Union (Initiative	sh.
			17.3	Checking Account	State Employees Credit Union (joint wi Floyd Smith)	tn \$1,650.00

Official Form 106A/B Schedule A/B: Property page 3

De	ebtor 1	Kyley C. Hei	rnandez		Case number (if known)	
			17.4.	Non Transaction Share Account as of 5/14/19	Nusenda Credit Union (joint with Floyd Smith)	\$1.00
			17.5.	Essential Personal Checking Account as of 5/14/19	Nusenda Credit Union (joint with Floyd Smith)	\$15.00
18.				ly traded stocks ent accounts with brokera	ge firms, money market accounts	
	☐ Yes			Institution or issuer name	:	
19.	joint v	ublicly traded st enture	ock and	interests in incorporate	d and unincorporated businesses, including an interest in an LLC,	partnership, and
	■ No □ Yes.	Give specific inf		about them	% of ownership:	
	Negoti Non-ne ■ No	iable instruments	include poents are comments are	personal checks, cashiers those you cannot transfer about them	e and non-negotiable instruments checks, promissory notes, and money orders. to someone by signing or delivering them.	
		nent or pension bles: Interests in	account		, thrift savings accounts, or other pension or profit-sharing plans	
	■ Yes.	List each accour		ely. of account:	Institution name:	
			Retire 6/30/	ement Account as of	PERA	\$30,365.00
22.	Your s		d deposit	s you have made so that	you may continue service or use from a company cutilities (electric, gas, water), telecommunications companies, or others	s
	☐ Yes.				Institution name or individual:	
23.	Annuiti ■ No	ies (A contract fo	or a period	dic payment of money to y	you, either for life or for a number of years)	
	☐ Yes	ls	suer nam	e and description.		
	26 U.S.0	ts in an education			ed ABLE program, or under a qualified state tuition program.	
	■ No □ Yes	ln	stitution r	ame and description. Sep	parately file the records of any interests.11 U.S.C. § 521(c):	
	Trusts, ■ No	, equitable or fu	ture inte	rests in property (other	than anything listed in line 1), and rights or powers exercisable for	your benefit
		Give specific inf	ormation	about them		
	Examp			s, trade secrets, and othes, websites, proceeds fro	ner intellectual property om royalties and licensing agreements	
	■ No □ Yes.	Give specific inf	ormation	about them		
27.	_Examp			r general intangibles usive licenses, cooperation	ve association holdings, liquor licenses, professional licenses	
	■ No □ Yes.	Give specific inf	ormation	about them		

Official Form 106A/B

page 4

Schedule A/B: Property

Debtor 1	Kyley C. Hernandez	Case number (if known)	
Money or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax re	funds owed to you		
■ No □ Yes.	Give specific information about them, including whether you already filed	the returns and the tax years	
■ No	v support ples: Past due or lump sum alimony, spousal support, child support, mainte Give specific information	enance, divorce settlement, property s	ettlement
Exam _i ■ No	amounts someone owes you ples: Unpaid wages, disability insurance payments, disability benefits, sick benefits; unpaid loans you made to someone else Give specific information	pay, vacation pay, workers' compens	ation, Social Security
	sts in insurance policies ples: Health, disability, or life insurance; health savings account (HSA); cre	edit, homeowner's, or renter's insuranc	е
☐ Yes.	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
If you somed	are the beneficiary of a living trust, expect proceeds from a life insurance pone has died. Give specific information	policy, or are currently entitled to receive	ve property because
Exam _i ■ No	s against third parties, whether or not you have filed a lawsuit or mad ples: Accidents, employment disputes, insurance claims, or rights to sue Describe each claim	e a demand for payment	
■ No	contingent and unliquidated claims of every nature, including counte	rclaims of the debtor and rights to s	et off claims
■ No	nancial assets you did not already list Give specific information		
	the dollar value of all of your entries from Part 4, including any entries art 4. Write that number here	. • •	\$32,091.00
Part 5: De	escribe Any Business-Related Property You Own or Have an Interest In. List an	y real estate in Part 1.	
37. Do you	own or have any legal or equitable interest in any business-related property?		
_	o to Part 6.		
	Go to line 38.		

Deb	tor 1 Kyley C. Hernandez		Case number (if known)	
Part	6: Describe Any Farm- and Commercial Fishing-Related Property You Olf you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. [Do you own or have any legal or equitable interest in any farm- c	or commercial fishin	ng-related property?	
	■ No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That You	Did Not List Above		
	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$165,368.00
56.	Part 2: Total vehicles, line 5	\$10,191.00		
57.	Part 3: Total personal and household items, line 15	\$2,900.00		
58.	Part 4: Total financial assets, line 36	\$32,091.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$45,182.00	Copy personal property total	\$45,182.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$210,550.00

Fil	l in this inforn	nation to identify your ca	ase:		
De	btor 1	Kyley C. Hernande	Z		
_	h O	First Name	Middle Name	Last Name	
	btor 2 ouse if, filing)	First Name	Middle Name	Last Name	
Un	ited States Bar	nkruptcy Court for the:	DISTRICT OF NEW MEXICO	0	
Ca	se number	_			
	nown)				☐ Check if this is an
				<u> </u>	amended filing
Of	fficial Fo	rm 106C			
			nerty Vou Cla	im as Exempt	4/19
	Silcadio	 	perty rod era	iiii as Exempt	4,13
the nee	property you lis	sted on <i>Schedule A/B: Pro</i> d d attach to this page as ma	pperty (Official Form 106A/B)	together, both are equally responsible as your source, list the property that your Page as necessary. On the top of an	
spe any fun exe	cific dollar an applicable st ds—may be u mption to a pa	nount as exempt. Alterna atutory limit. Some exen nlimited in dollar amoun	atively, you may claim the f nptions—such as those for it. However, if you claim an	e amount of the exemption you claim ull fair market value of the property be health aids, rights to receive certain exemption of 100% of fair market value is determined to exceed that amou	peing exempted up to the amount of benefits, and tax-exempt retirement lue under a law that limits the
Pa	rt 1: Identif	y the Property You Clain	n as Exempt		
1.	Which set of	exemptions are you claim	iming? Check one only, eve	n if your spouse is filing with you.	
	☐ You are cla	aiming state and federal ne	onbankruptcy exemptions.	11 U.S.C. § 522(b)(3)	
	You are cla	aiming federal exemptions	. 11 U.S.C. § 522(b)(2)		
2.	For any prop	erty you list on Schedul	e A/B that you claim as exe	empt, fill in the information below.	
		on of the property and line of that lists this property	on Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.	

Official Form 106C

11 U.S.C. § 522(d)(1)

11 U.S.C. § 522(d)(3)

11 U.S.C. § 522(d)(3)

11 U.S.C. § 522(d)(3)

11 U.S.C. § 522(d)(4)

\$3,345.00

\$2,000.00

\$600.00

\$200.00

\$100.00

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

3251 Tin Cup Rd. NE Rio Rancho, NM

Household goods and furnishings

87144 Sandoval County Value per zillow.com

Line from Schedule A/B: 1.1

Line from Schedule A/B: 6.1

Line from Schedule A/B: 7.1

Line from Schedule A/B: 11.1

Line from Schedule A/B: 12.1

Electronics

Clothing

Jewelry

\$165,368.00

\$2,000.00

\$600.00

\$200.00

\$100.00

Debtor 1	Kyley C. Hernandez			Case number (if known)	
	f description of the property and line on edule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B Amount of the exemption you claim Check only one box for each exemption.			Specific laws that allow exemption
Em _l Flo	rings Account as of 5/14/19: State ployees Credit Union (joint with yd Smith)	\$50.00	■	\$50.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Kas	sasa Cash Back Saver Account as	\$10.00		\$10.00	11 U.S.C. § 522(d)(5)
Uni	i/14/19: State Employees Credit on (joint with Floyd Smith) from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	sasa Cash Back Checking count as of 5/14/19: State	\$1,650.00		\$1,650.00	11 U.S.C. § 522(d)(5)
Em _l Flo	ployees Credit Union (joint with yd Smith) from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
	n Transaction Share Account as of 4/19: Nusenda Credit Union (joint	\$1.00		\$1.00	11 U.S.C. § 522(d)(5)
with	h Floyd Smith) from Schedule A/B: 17.4			100% of fair market value, up to any applicable statutory limit	
	sential Personal Checking	\$15.00		\$15.00	11 U.S.C. § 522(d)(5)
Cre	dit Union (joint with Floyd Smith) from Schedule A/B: 17.5			100% of fair market value, up to any applicable statutory limit	
Ret PEF	irement Account as of 6/30/18:	\$30,365.00		\$30,365.00	11 U.S.C. § 522(d)(12)
Line from Schedule A/B: 21.1				100% of fair market value, up to any applicable statutory limit	
	you claiming a homestead exemption object to adjustment on 4/01/22 and every 3			led on or after the date of adjustmen	nt.)
	Yes. Did you acquire the property covere	ed by the exemption wi	ithin 1	,215 days before you filed this case	?
	□ No □ Yes				

Fill in this informati	ion to identify your	case:				
	Kyley C. Hernan					
Debtor 2	First Name	Middle Name Last	Name			
_	First Name	Middle Name Last	Name			
United States Bankru	uptcy Court for the:	DISTRICT OF NEW MEXICO				
Case number (if known)						c if this is an ded filing
Official Form 1 Schedule D		Who Have Claims Sec	cured	by Propert	у	12/15
		two married people are filing together, bot ut, number the entries, and attach it to this				
1. Do any creditors hav	ve claims secured by	your property?				
☐ No. Check thi	s box and submit th	is form to the court with your other scheo	dules. You	have nothing else t	o report on this form.	
_	of the information b	·		J	·	
		Clow.				
-	ecured Claims			Column A	Column B	Column C
for each claim. If more	than one creditor has	ore than one secured claim, list the creditor so a particular claim, list the other creditors in Pa al order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Mr. Cooper		Describe the property that secures the cla	im:	\$134,060.00	\$165,368.00	\$0.00
Creditor's Name		3251 Tin Cup Rd. NE Rio Rancho NM 87144 Sandoval County),			
8950 Cypres	s Waters	Value per zillow.com As of the date you file, the claim is: Check a	all that			
Blvd.	5040	apply.	all triat			
Dallas, TX 75		Contingent				
Number, Street, City	, State & Zip Code	Unliquidated				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		■ An agreement you made (such as mortga	ge or secur	red		
Debtor 2 only		car loan)				
Debtor 1 and Debto	r 2 only	☐ Statutory lien (such as tax lien, mechanic'	s lien)			
At least one of the d	ebtors and another	Judgment lien from a lawsuit				
Check if this claim community debt	relates to a	Other (including a right to offset)				
Date debt was incurre	d Unknown	Last 4 digits of account number	xxxx			

Debtor 1 Kyley C. Hernandez		Case number (if known)		
First Name Middle	Name Last Name			
2.2 Nusenda Federal Credit Union	Describe the property that secures the claim:	\$21,898.00	\$10,191.00	\$11,707.00
Creditor's Name P.O. Box 8530	2016 Nissan Rogue 30,512 miles Average condition per edmunds.com As of the date you file, the claim is: Check all that apply.			
Albuquerque, NM 87198	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or s car loan)	ecured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and anothe	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred 5/2016	Last 4 digits of account number 4085	<u> </u>		
2.3 Selene Finance	Describe the property that secures the claim:	\$27,963.00	\$165,368.00	\$595.00
Creditor's Name	3251 Tin Cup Rd. NE Rio Rancho, NM 87144 Sandoval County			
120 Gibral Tar Rd., Ste. 300	Value per zillow.com			
	As of the date you file, the claim is: Check all that			
Horsham, PA 19044	apply.			
Number, Street, City, State & Zip Code	apply. ☐ Contingent ☐ Unliquidated			
· · · · · · · · · · · · · · · · · · ·	apply. Contingent			
Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only	apply. ☐ Contingent ☐ Unliquidated ☐ Disputed	ecured		
Number, Street, City, State & Zip Code Who owes the debt? Check one.	apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or s car loan)	ecured		
Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only	apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or s car loan) Statutory lien (such as tax lien, mechanic's lien)	ecured		
Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or s car loan) Statutory lien (such as tax lien, mechanic's lien)	ecured		
Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or s car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit			
Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe Check if this claim relates to a community debt Date debt was incurred 1/2007	apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or s car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number 1119	<u> </u>		
Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe Check if this claim relates to a community debt Date debt was incurred 1/2007 Add the dollar value of your entries in	apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or s car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)		00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Fill in this	s information	on to identify your ca	se:					
Debtor 1		(yley C. Hernandez	Middle Nan	ne	Last Name			
Debtor 2	. , _							
(Spouse if, fili		irst Name	Middle Nan		Last Name			
United Sta	ates Bankru	ptcy Court for the:	DISTRICTOR	F NEW MEXICO				
Case num (if known)	nber							Check if this is an
Schedu		Creditors Wh				Part 2 for creditors with NON	PRIORITY C	amended filing 12/15 laims. List the other party to
any executor Schedule G Schedule D left. Attach to name and c	ory contracts : Executory : Creditors V the Continuates case number	s or unexpired leases the Contracts and Unexpire Who Have Claims Secure ation Page to this page.	at could result d Leases (Offi ed by Property If you have no	t in a claim. Also listicial Form 106G). Do r. If more space is no information to rep	st executory on the second of	contracts on Schedule A/B: P any creditors with partially s the Part you need, fill it out, r do not file that Part. On the to	roperty (Off ecured clain number the	icial Form 106A/B) and on ns that are listed in entries in the boxes on the
1. Do any	y creditors h	ave priority unsecured o	laims against	you?				
■ No.	. Go to Part 2							
☐ Yes	S.							
Part 2:	List All of	Your NONPRIORITY	Unsecured (Claims				
3. Do any	y creditors h	ave nonpriority unsecur	ed claims aga	inst you?				
☐ No.	. You have no	thing to report in this part	. Submit this fo	rm to the court with y	our other sche	edules.		
■ Yes	S.							
unsecu	ured claim, list	the creditor separately for	or each claim. F	or each claim listed,	identify what t	holds each claim. If a credito ype of claim it is. Do not list cla three nonpriority unsecured cla	ims already	included in Part 1. If more
								Total claim
		Associates	L	ast 4 digits of acco	ount number	8429		\$85.00
Р	onpriority Cre O Box 92	290	v	When was the debt	incurred?	4/2019		
		ue, NM 87199 City State Zip Code		As of the date you fi	ile the claim i	s: Check all that apply		
		the debt? Check one.	•	io or the data you h		o. Onook all that apply		
	Debtor 1 on	ly	[☐ Contingent				
	Debtor 2 on	ly	[☐ Unliquidated				
	Debtor 1 an	d Debtor 2 only	[☐ Disputed				
	At least one	of the debtors and anoth	_	Type of NONPRIORI	ITY unsecured	d claim:		
		is claim is for a commu	nity	Student loans				
	ebt the claim su	bject to offset?	[r	☐ Obligations arising eport as priority clain	g out of a sepa ns	ration agreement or divorce that	at you did no	ot
	No		_			g plans, and other similar debts	6	
] Yes		ı	Other. Specify	Medical Ac	count.		

Debte	or 1 Kyley C. Hernandez		Case number (if known)				
4.2	Avant	Last 4 digits of account number	8227	\$5,954.00			
	Nonpriority Creditor's Name 222 N. LaSalle St. Suite 1700	When was the debt incurred?	6/2015				
	Chicago, IL 60601 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharin	•				
	Yes	Other. Specify Installment	Note Loan Account.				
4.3	Barclays Bank Delaware Nonpriority Creditor's Name	Last 4 digits of account number	3795	\$1,977.00			
	P.O. Box 8803 Wilmington, DE 19899	When was the debt incurred?	5/2015				
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	_					
	Debtor 1 only	Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	☐ Check if this claim is for a community debt Is the claim subject to offset?						
	■ No	☐ Debts to pension or profit-sharin					
	Yes	Other Specify Revolving	Credit Card Account.				
4.4	Capital One Bank USA	Last 4 digits of account number	2266	\$3,342.00			
	Nonpriority Creditor's Name	When was the debt incurred?	6/2011				
	PO Box 30281 Salt Lake City, UT 84130-0285	_					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Спеск ан that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated ☐ Disputed					
	Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	■ Other. Specify Revolving	Credit Card Account.				

IRS	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name P.O. Box 7346 Philadelphia, PA 19101	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Federal Taxes	
MediCredit Inc.	Last 4 digits of account number 1017	\$153.00
Nonpriority Creditor's Name PO Box 1629	When was the debt incurred? 6/2018	
Maryland Heights, MO 63043-0629	_ 	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical Collection Account.	
MediCredit Inc.	Last 4 digits of account number 7347	\$167.00
Nonpriority Creditor's Name PO Box 1629 Maryland Heights, MO 63043-0629	When was the debt incurred? 6/2016	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Medical Collection Account.	

Debto	r 1 Kyley C. Hernandez	Case number (if known)					
4.8	MediCredit Inc.	Last 4 digits of account number 9840	\$2,050.00				
	Nonpriority Creditor's Name PO Box 1629	When was the debt incurred? 3/2018					
	Maryland Heights, MO 63043-0629 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	Политическ					
		☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:					
	☐ At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Medical Collection Account.					
4.9	Nissan Motor Acceptance	Last 4 digits of account number 1950	\$21,168.00				
	Nonpriority Creditor's Name						
	P.O. Box 660366 Dallas, TX 75266-0360	When was the debt incurred? 9/2016					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	☐ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	■ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Auto Loan on a voluntarily surrendered vehicle.					
4.1	NM Tax & Revenue	Last 4 digits of account number	\$0.00				
0	Nonpriority Creditor's Name Bankruptcy Section	When was the debt incurred?					
	PO Box 8575 Albuquerque, NM 87198						
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	Пол					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:					
	At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	□ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	■ Other. Specify State Taxes					

Presbyterian Healthcare Services	Last 4 digits of account number	4851	\$236.0
Nonpriority Creditor's Name PO Box 27822	When was the debt incurred?	7/2018	
Albuquerque, NM 87125-8722 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	П		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	l claim:	
At least one of the debtors and another	☐ Student loans	i ciaiii.	
☐ Check if this claim is for a community debt Is the claim subject to offset?	<u> </u>	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	Other. Specify Medical Ac	count.	
Presbyterian Healthcare Services	Last 4 digits of account number	4851	\$95.
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ33.
PO Box 27822 Albuquerque, NM 87125-8722	When was the debt incurred?	3/2019	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Medical Ac	count.	
SYNCB/Care Credit	Land Addition of a company of the company	5609	\$2,477.
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ2,711.
C/O PO Box 965036 Orlando, FL 32896	When was the debt incurred?	1/2013	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Student loans		
☐ Check if this claim is for a community debt	0 1	ration agreement or divorce that you did not	
-	☐ Obligations arising out of a sepa report as priority claims ☐ Debts to pension or profit-sharin	,	

Debtor 1	Kyley C. I	Hernandez	Case number (if known)					
4.1	WF/Preferre	ed Cust Acct	Last 4 digits of account numbe	r 9221		\$1,262.00		
I	Nonpriority Cred PO Box 145 Des Moines	517	When was the debt incurred?	1/20	14			
1	Number Street	City State Zip Code the debt? Check one.	As of the date you file, the clair	n is: Chec	k all that apply			
Debtor 1 only			☐ Contingent					
_	Debtor 2 onl	•	☐ Unliquidated					
_	Debtor 1 and	-	Disputed					
ı	At least one	of the debtors and another	Type of NONPRIORITY unsecu	red claim:				
l		is claim is for a community	☐ Student loans	naration a	greement or divorce that you did not			
ı	ls the claim su	bject to offset?	report as priority claims	ραιαιίοπ αξ	greement of divorce that you did not			
1	■ No		Debts to pension or profit-sha	ring plans,	and other similar debts			
I	☐ Yes		Other. Specify Revolving	g Charge	Account.	-		
Part 3:	List Others	s to Be Notified About a De	ebt That You Already Listed					
is trying have m	g to collect fro	m you for a debt you owe to s	about your bankruptcy, for a debt tha omeone else, list the original creditor at you listed in Parts 1 or 2, list the ad or submit this page.	in Parts 1	or 2, then list the collection agency	y here. Similarly, if you		
	d Address	4.0.0	On which entry in Part 1 or Part 2 did yo		•			
	ude & Feliz urphy Cany	, -	Line 4.13 of (Check one):					
3rd Flo		yon itu.		■ Part 2:	Creditors with Nonpriority Unsecured	Claims		
San Die	ego, CA 921	123	Look 4 digita of a count number					
			Last 4 digits of account number					
	d Address	DUC	On which entry in Part 1 or Part 2 did yo		9			
	ian Billing-I x 26666	гпо			Creditors with Priority Unsecured Clair			
	erque, NM	87125		Part 2:	Creditors with Nonpriority Unsecured	Claims		
			Last 4 digits of account number					
	d Address edical Cent	ter	On which entry in Part 1 or Part 2 did you Line 4.7 of (<i>Check one</i>):		original creditor? Creditors with Priority Unsecured Clai	ime		
	x 27822				Creditors with Nonpriority Unsecured			
Albuqu	erque, NM	87125-8722		— T alt 2.	orcanors with Nonphority Onscoured	Ciamis		
			Last 4 digits of account number					
	d Address edical Cent	ter	On which entry in Part 1 or Part 2 did you Line 4.8 of (<i>Check one</i>):		original creditor? Creditors with Priority Unsecured Clai	ims		
	x 27822			_	Creditors with Nonpriority Unsecured			
Albuqu	erque, NM	87125-8722	Last 4 digits of account number					
			Last 1 digite of decount flumbor					
Part 4:	Add the A	mounts for Each Type of U	nsecured Claim					
	ne amounts of unsecured cla		aims. This information is for statistica	l reporting	purposes only. 28 U.S.C. §159. Ad	d the amounts for each		
					Total Claim			
_	6a.	Domestic support obligation	ns	6a.	\$0.00	_		
To clai	otal ims							
from Pa		Taxes and certain other deb		6b.	\$ 0.00	_		
	6c. 6d.		I injury while you were intoxicated secured claims. Write that amount here.	6c. 6d.	\$ 0.00	_		
	ou.	Canon Add an other priority dr	iscoured ciaims. Write triat amount nere.	ou.	\$	-		
	6e.	Total Priority. Add lines 6a th	rough 6d.	6e.	\$	_		
					Total Claim	_		
	6f.	Student loans		6f.	\$ 0.00			

Official Form 106 E/F

Total

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor 1 Kyley C. Hernandez

Case number (if known)

	claim	ıs
from	Part	2

- Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 Debts to pension or profit-sharing plans, and other similar debts 6g.
- 6h.
- Other. Add all other nonpriority unsecured claims. Write that amount
- Total Nonpriority. Add lines 6f through 6i.

0.00	\$ 6g.
0.00	\$ 6h.
38,966.00	\$ 6i.

6j.	\$ 38,966.00

Fill in this inform					
Debtor 1	Kyley C. Hernand	lez			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	DISTRICT OF NEW MEXICO	1		
Case number					
(if known)					Check if this is an
					amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u>=</u>
2.3	-				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	-

	nis information to identify your				
Debtor 1	Kyley C. Hernand	Middle Name	Last Name		
Debtor 2		Wildale Harrie	Edot Name		
(Spouse if,	filing) First Name	Middle Name	Last Name		
United S	States Bankruptcy Court for the:	DISTRICT OF NEW MEXIC	0		
Case nu	ımber				
(if known)					Check if this is an amended filing
Offici	al Form 106H				
	dule H: Your Cod	ebtors			12/15
people a ill it out,		ially responsible for supplyire boxes on the left. Attach the	ng correct informat	tion. If more space is ne	te as possible. If two married eeded, copy the Additional Page, of any Additional Pages, write
1. D	o you have any codebtors? (If	you are filing a joint case, do r	not list either spouse	e as a codebtor.	
□ N ■ Y					
	/ithin the last 8 years, have yoona, California, Idaho, Louisiana				states and territories include
_				,	
_	lo. Go to line 3.	una ar lagal aguirralant liva wii	th viou at the time?		
■ Y	es. Did your spouse, former spo	use, or legal equivalent live wil	tn you at the time?		
	■ No □ Yes.				
	In which community stat	e or territory did you live?	-NONE-	. Fill in the name an	d current address of that person.
	Name of your spouse, former sp Number, Street, City, State & Zi				
in li Fori	column 1, list all of your codeb ne 2 again as a codebtor only	tors. Do not include your spo if that person is a guarantor	or cosigner. Make	sure you have listed the	y with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and 2	IP Code		Column 2: The cree Check all schedules	ditor to whom you owe the debt s that apply:
3.1	Floyd Smith 3251 Tin Cup Rd. NE Rio Rancho, NM 87144			■ Schedule D, lir □ Schedule E/F, □ Schedule G Nusenda Federa	line
3.2	Floyd Smith 3251 Tin Cup Rd. NE Rio Rancho, NM 87144			☐ Schedule D, lir ■ Schedule E/F, ☐ Schedule GNissan Motor Ac	line 4.9

Eill	in this information to identify your ca								
	btor 1 Kyley C. He								
De	btor 2	nunce2			_ _				
Un	ited States Bankruptcy Court for the	: DISTRICT OF NEW N	MEXICO						
	se number nown)						nt showing postp		
\cap	fficial Form 106I						as of the following	date:	
	chedule I: Your Inc	ome				MM / DD/ Y	YYY	12/15	
sup spo atta	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your s ith you, do not includ	spouse i de infori	is livii matio	ng with you, inclu n about your spo	ude information a use. If more spa	about your ce is needed,	
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing sp	ouse	
	If you have more than one job,	Empleyment status	■ Employed			☐ Emplo	☐ Employed		
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not er	mployed		
	employers.	Occupation	Docket Clerk						
	Include part-time, seasonal, or self-employed work.	Employer's name	State of NM-Wor Compensation	rkers					
	Occupation may include student or homemaker, if it applies.	Employer's address	2410 Centre Ave Albuquerque, N	_	6				
		How long employed the	here? 14 years	s					
Pa	rt 2: Give Details About Mor	nthly Income							
spo If yo	imate monthly income as of the di use unless you are separated. ou or your non-filing spouse have mo e space, attach a separate sheet to	ore than one employer, co	,					· ·	
						For Debtor 1	For Debtor 2 o		
2.	List monthly gross wages, sala deductions). If not paid monthly,	3,		2.	\$_	2,407.00	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$_	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$_	2,407.00	\$N	/A	

				F	For Debtor 1			Debtor		
	Copy	y line 4 here	4.	\$	2,407	.00	\$		N/A	<u> </u>
5.	List a	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	415	00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$			\$_		N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$.00	\$-		N/A	_
	5d.	Required repayments of retirement fund loans	5d.	\$.00	\$		N/A	_
	5e.	Insurance	5e.	\$			\$_		N/A	_
	5f.	Domestic support obligations	5f.	\$.00	\$		N/A	_
	5g.	Union dues	5g.	\$.00	\$		N/A	_
	5h.	Other deductions. Specify: CWA Member	5h.+	\$			+ \$_		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	958	.00	\$		N/A	<u>\</u>
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,449	.00	\$_		N/A	<u>\</u>
8.	List a	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a.	\$.00	\$_		N/A	_
	8b.	Interest and dividends	8b.	\$	S0	.00	\$_		N/A	<u>\</u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	5 0	.00	\$		N/A	L
	8d.	Unemployment compensation	8d.	\$	0	.00	\$		N/A	<u> </u>
	8e.	Social Security	8e.	\$	0	.00	\$		N/A	<u> </u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$.00	\$_		N/A	_
	8g.	Pension or retirement income	8g.	\$	50	.00	\$_		N/A	<u>\</u>
		Boyfriend gives \$600/mo. towards								
	8h.	Other monthly income. Specify: mortgage	_ 8h.+ _	\$	600	.00	+ \$_		N/A	<u>\</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	600	.00	\$_		N/	Α
10.	Calc	ulate monthly income. Add line 7 + line 9.	10. \$		2,049.00	+ \$		N/A	= \$	2,049.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	' -		_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	` -			' -	_,
11.	State Include other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a	depend		.,		•		∍ J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reset hat amount on the Summary of Schedules and Statistical Summary of Certaines						ı. 12.	\$	2,049.00
									Comb	
13.	Do y	ou expect an increase or decrease within the year after you file this form'	?						month	ly income
	_									
		Yes. Explain:								

EIII	in this informa	tion to identify yo	our aggs:					
Deb	tor 1	Kyley C. Her	nandez				k if this is: An amended filing	
1	otor 2						A supplement show	ving postpetition chapter
(Spo	ouse, if filing)					1	13 expenses as of	the following date:
Unit	ed States Bankr	uptcy Court for the	: DISTRI	CT OF NEW MEXICO		1	MM / DD / YYYY	
	e numbe r nown)							
Of	fficial Fo	rm 106J						
S	chedule	J: Your	Exper	ises				12/15
Be info	as complete a	and accurate as	possible.	. If two married people ar ch another sheet to this				
Par 1.	t 1: Descr Is this a joir	ibe Your House	hold					
١.	■ No. Go to	line 2.	in a canar	ate household?				
	□ res. Doe		iii a sepai	ate nousenoid?				
	= ::	_	st file Offici	al Form 106J-2, <i>Expen</i> ses	for Separate House	hold of Debto	or 2.	
2.	Do you have	e dependents?	■ No					
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			-			☐ Yes
								□ No □ Yes
								□ No
								☐ Yes
								□ No
2	De veur evr	anaaa inaluda	_					☐ Yes
3.		penses include f people other t	han	No				
	yourself and	d your depende	nts? ⊔	Yes				
Par	t 2: Estim	ate Your Ongoi	ng Monthi	y Expenses				
exp	imate your ex enses as of a plicable date.	openses as of your date after the l	our bankri bankruptc	uptcy filing date unless y y is filed. If this is a supp	ou are using this fo lemental <i>Schedule</i>	orm as a sup J, check the	oplement in a Cha e box at the top o	pter 13 case to report f the form and fill in the
				government assistance i				
	value of sucl ficial Form 10		d have inc	cluded it on Schedule I: Y	our Income		Your exp	enses
	-					_		
4.		or nome owners and any rent for th		ses for your residence. In or lot.	nclude first mortgage	4. \$		762.00
	If not includ	led in line 4:						
		estate taxes				4a. \$		0.00
	•	rty, homeowner's				4b. \$		86.00
		maintenance, re owner's associat		upkeep expenses		4c. \$ 4d. \$		50.00 39.00
5.				our residence, such as ho	me equity loans	5. \$		338.00

Official Form 106J Schedule J: Your Expenses

Case 19-11160-t7 Doc 1 Filed 05/17/19 Entered 05/17/19 09:08:39 Page 31 of 42

Fill in this	s information to identify your	case:		
Debtor 1	Kyley C. Hernand	lez		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, fil	ing) First Name	Middle Name	Last Name	_
United Sta	ates Bankruptcy Court for the:	DISTRICT OF NEW MEXIC	0	_
Case num (if known)	nber			Check if this is an amended filing
	Form 106Dec aration About a	ın Individual D	ebtor's Schedule	S 12/15
obtaining		n connection with a bankrup		e statement, concealing property, or 250,000, or imprisonment for up to 20
Did	you pay or agree to pay some	one who is NOT an attorney	to help you fill out bankruptcy forr	ns?
	No			
	Yes. Name of person			h Bankruptcy Petition Preparer's Notice, aration, and Signature (Official Form 119)
	r penalty of perjury, I declare hey are true and correct.	that I have read the summar	y and schedules filed with this dec	laration and
X /	s/ Kyley C. Hernandez		X	
	(yley C. Hernandez Signature of Debtor 1		Signature of Debtor 2	
	Date May 16, 2019		Date	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill	l in this inforr	nation to identify your	case:							
De	btor 1	Kyley C. Hernan		Last Name						
	btor 2 ouse if, filing)	First Name	Middle Name Middle Name	Last Name Last Name						
Un	ited States Ba	nkruptcy Court for the:	DISTRICT OF NEW MEX	ICO						
	se number _				c	heck if this is an				
					ar	nended filing				
	fficial Fo atement		Affairs for Individ	luals Filing for B	ankruptcy	4/19				
info nun	ormation. If m	nore space is needed, n). Answer every ques	attach a separate sheet to stion.	this form. On the top of any	equally responsible for supp additional pages, write you					
Ра 1.		Details About Your Ma	rital Status and Where You	Lived Before						
•	☐ Married ■ Not mai		3.							
2.			lived anywhere other than v	where you live now?						
	■ No □ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.									
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there				
3. stat					ity property state or territory co, Texas, Washington and W					
	■ No									
		·	nedule H: Your Codebtors (Of	ficial Form 106H).						
Pa	rt 2 Explai	in the Sources of You	r Income							
4.	Fill in the tota	al amount of income you	nployment or from operatin u received from all jobs and a have income that you receive	Ill businesses, including part-		dar years?				
	□ No ■ Yes. Fil	I in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$10,832.00	☐ Wages, commissions, bonuses, tips					
			☐ Operating a business		☐ Operating a business					

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Mr. Cooper 8950 Cypress Waters Blvd. Dallas, TX 75019	Last Three Months on a mortgage account	\$2,286.00	\$134,060.00	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Yes

attorney for this bankruptcy case.

Debt	or 1 Ky	ley C. Hernandez	Case number (if known)					
	Creditor'	s Name and Address	Dates of payment	Total amount	Amount you still owe	Was this payment for		
		Finance ral Tar Rd., Ste. 300 m, PA 19044	Last Three Months on a second mortgage	\$1,014.00	\$27,963.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other Second Mortgagae		
	P.O. Bo	a Federal Credit Union x 8530 erque, NM 87198	Last Three Months on a 2016 Nissan Rouge	\$666.00	\$21,898.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other		
((<i>nsider</i> s in of which y	rear before you filed for bankru clude your relatives; any general ou are an officer, director, person s you operate as a sole proprietor	partners; relatives of any ger in control, or owner of 20% of	neral partners; partners partners or more of their voting	erships of which yo g securities; and a	u are a general partner; corporations ny managing agent, including one for		
]]	■ No □ Yes.	List all payments to an insider.						
	Insider's	Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment		
i 	nsider? nclude pa	rear before you filed for bankru		ments or transfer a	any property on a	ccount of a debt that benefited an		
		Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for this payment Include creditor's name		
Part	4: Ide	ntify Legal Actions, Repossessi	ions, and Foreclosures	paid	Still Owe	include creditors name		
L	ist all suc	vear before you filed for bankru th matters, including personal inju- ons, and contract disputes.						
] [■ No □ Yes.	Fill in the details.						
	Case title		Nature of the case	Court or agency		Status of the case		
		rear before you filed for bankru that apply and fill in the details be		erty repossessed, f	oreclosed, garnis	shed, attached, seized, or levied?		
[□ No. C	Go to line 11.						
		Fill in the information below. Name and Address	Describe the Property		Date	Value of the		

Explain what happened

property

Dei	otor i Kyley C. Hernandez		Case number	(if known)					
	Creditor Name and Address	D	escribe the Property	Date	Value of the				
		Е	xplain what happened		property				
	Nissan Motor Acceptance P.O. Box 660366		016 Nissan Versa	1/2019	\$21,168.00				
	Dallas, TX 75266-0360		Property was repossessed.						
			Property was foreclosed.						
			Property was garnished.						
			Property was attached, seized or levied.						
			.,.,						
11.	Within 90 days before you filed for ban accounts or refuse to make a payment		, did any creditor, including a bank or financial ins e you owed a debt?	stitution, set off any	amounts from your				
	■ No								
	☐ Yes. Fill in the details.								
	Creditor Name and Address	D	escribe the action the creditor took	Date action was taken	Amount				
12.	Within 1 year before you filed for banks court-appointed receiver, a custodian, No Yes		was any of your property in the possession of an a her official?	assignee for the ben	efit of creditors, a				
Par	t 5: List Certain Gifts and Contribution	ne							
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No								
	☐ Yes. Fill in the details for each gift.								
	Gifts with a total value of more than \$6 per person	600	Describe the gifts	Dates you gave the gifts	Value				
	Person to Whom You Gave the Gift an Address:	d							
14.	Within 2 years before you filed for bank	kruptcy,	, did you give any gifts or contributions with a tota	l value of more than	\$600 to any charity?				
	■ No								
	☐ Yes. Fill in the details for each gift or	contribu	ution.						
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co		Describe what you contributed	Dates you contributed	Value				
		,uc,							
Par	t 6: List Certain Losses								
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?								
	■ No								
	Yes. Fill in the details.								
	Describe the property you lost and	Desc	ribe any insurance coverage for the loss	Date of your	Value of property				
	how the loss occurred		·	loss	lost				
			de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.						

Pai	tt 7: List Certain Payments or Transfers							
16.	Within 1 year before you filed for bankruptcy, d consulted about seeking bankruptcy or prepari Include any attorneys, bankruptcy petition preparer	ng a bankruptcy petition?			rty to anyone you			
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any prope transferred	Date payment or transfer was made	Amount of payment				
	Access Counseling 633 W. 5th St. Ste 26001 Los Angeles, CA 90071	Credit Counseling		3/14/19	\$24.00			
	Matthew Gandert 1128 Pennsylvania St. NE Suite 210 Albuquerque, NM 87110	Attorney Fees		2/27/19	\$990.00			
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details.							
	Person Who Was Paid Address	Description and value of any propertransferred	Date payment or transfer was made	Amount of payment				
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busin Include both outright transfers and transfers made include gifts and transfers that you have already list No Yes. Fill in the details.	ness or financial affairs? as security (such as the granting of a se						
	Person Who Received Transfer Address			any property or received or debts change	Date transfer was made			
	Person's relationship to you							
19.	Within 10 years before you filed for bankruptcy, beneficiary? (These are often called asset-protect No Yes. Fill in the details.		elf-settled tru	ıst or similar device	of which you are a			
	Name of trust Description and value of the property tr			y transferred Date Transfer was made				
Par	rt 8: List of Certain Financial Accounts, Instru	ments, Safe Deposit Boxes, and Stor	age Units					
	Within 1 year before you filed for bankruntov w	•		your name, or for w	our benefit closed			

sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No

☐ Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)

Last 4 digits of account number

Type of account or instrument

Date account was closed, sold, moved, or transferred Last balance before closing or transfer

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

21.	 Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? 							
	No No							
	Yes. Fill in the details.			_				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?				
22.	Have you stored property in a storage unit or pla No	ace other than your home within 1	year before you filed for bankruptcy?	?				
	Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?				
Pai	tt 9: Identify Property You Hold or Control for S	Someone Else						
23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in for someone.								
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value				
Pai	rt 10: Give Details About Environmental Informa	ation						
For	the purpose of Part 10, the following definitions	apply:						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the ai regulations controlling the cleanup of these sub	ir, land, soil, surface water, ground						
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	-	aw, whether you now own, operate, o	or utilize it or used				
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s		waste, hazardous substance, toxic s	ubstance,				
Rep	oort all notices, releases, and proceedings that yo	ou know about, regardless of when	they occurred.					
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	under or in violation of an environme	ental law?				
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any	release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and	Environmental law, if you know it	Date of notice				
		ZIP Code)						

Statement of Financial Affairs for Individuals Filing for Bankruptcy

De	btor 1	Kyley C. Hernandez		Case number (if known)							
26.	Have	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.									
	■ No □ Yes. Fill in the details.										
		e Title e Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case						
Pa	rt 11:	Give Details About Your Business or	r Connections to Any Business								
27.	With	lithin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?									
☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time											
		☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)									
		☐ A partner in a partnership									
		☐ An officer, director, or managing e	xecutive of a corporation								
		☐ An owner of at least 5% of the voting or equity securities of a corporation									
		No. None of the above applies. Go to	Part 12.								
	_		II in the details below for each business	i.							
	Bus	iness Name	Describe the nature of the business	Employer Identification number							
		ress ber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number or ITIN.							
		Dates business existed									
28.		in 2 years before you filed for bankrup autions, creditors, or other parties.	otcy, did you give a financial statement t	to anyone about your business? Ind	clude all financial						
		No									
		Yes. Fill in the details below.									
		Ne ress ber, Street, City, State and ZIP Code)	Date Issued								
Pa	rt 12:	Sign Below									
l ha	ve rea	d the answers on this Statement of Fi	inancial Affairs and any attachments, an	nd I declare under nenalty of neriury	that the answers						
are with	true a 1 a ba	nd correct. I understand that making a	a false statement, concealing property, o \$250,000, or imprisonment for up to 20	or obtaining money or property by							
		y C. Hernandez	_								
		. Hernandez e of Debtor 1	Signature of Debtor 2								
Da	te N	lay 16, 2019	Date								
Did ■ N	-	ttach additional pages to Your Statem	nent of Financial Affairs for Individuals F	Filing for Bankruptcy (Official Form	107)?						
	⁄es										
Did ■ N		ay or agree to pay someone who is no	ot an attorney to help you fill out bankru	ptcy forms?							
		ame of Person Attach the Bankr	uptcy Petition Preparer's Notice, Declaration	on, and Signature (Official Form 119).							

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Fill in	n this information to identify your case:					irected in this form and	in Form
Debt	tor 1 Kyley C. Hernandez		12	2A-1Su _l	op:		
Debt (Spou	tor 2			■ 1. Th	ere is no pres	umption of abuse	
Unite	ed States Bankruptcy Court for the: District of New Mex	ico	_	a	oplies will be m	o determine if a presur nade under <i>Chapter 7</i> icial Form 122A-2).	•
(if kno	e number wn)			□ 3. Th	e Means Test	does not apply now be service but it could ap	
						n amended filing	<u> </u>
Off	icial Form 122A - 1					•	
Ch	apter 7 Statement of Your Curr	ent Mor	nthly Inc	ome	•		12/15
attach case i	complete and accurate as possible. If two married people are a separate sheet to this form. Include the line number to who number (if known). If you believe that you are exempted from ying military service, complete and file Statement of Exempted 1: Calculate Your Current Monthly Income	ich the additior a presumption	nal information a of abuse becau	applies.	On the top of ail	ny additional pages, write narily consumer debts o	te your name and or because of
1.	What is your marital and filing status? Check one only	/ -					
	Not married. Fill out Column A, lines 2-11.						
	☐ Married and your spouse is filing with you. Fill out			2-11.			
	☐ Married and your spouse is NOT filing with you. Y	•	•				
	☐ Living in the same household and are not legal						
	Living separately or are legally separated. Fill or penalty of perjury that you and your spouse are legaliving apart for reasons that do not include evading	gally separated	d under nonbar	nkruptcy	law that applie	es or that you and your	
10 the	Il in the average monthly income that you received from all so 11(10A). For example, if you are filing on September 15, the 6-more 6 months, add the income for all 6 months and divide the total because own the same rental property, put the income from that pro-	nth period would by 6. Fill in the res	be March 1 throsult. Do not include	ugh Augu de any in	ist 31. If the amo	ount of your monthly incon ore than once. For examp	ne varied during ble, if both
				Colum Debto		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, a payroll deductions).	nd commissio	ons (before all	\$	2,407.00	\$	
3.	Alimony and maintenance payments. Do not include p Column B is filled in.	ayments from	a spouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly pai of you or your dependents, including child support. I from an unmarried partner, members of your household, and roommates. Include regular contributions from a spo filled in. Do not include payments you listed on line 3.	Include regular your depende	contributions nts, parents,	\$	600.00	\$	
5.	Net income from operating a business, profession, o						
			tor 1				
	Gross receipts (before all deductions)	\$ 0.00 -\$ 0.00					
	Ordinary and necessary operating expenses		Copy here ->	. \$	0.00	\$	
6.	Net monthly income from a business, profession, or farm Net income from rental and other real property	<u> </u>	Copy noic >	Ψ		Ψ	
0.	not moonic from remainand other real property	Deb	otor 1				
	Gross receipts (before all deductions)	\$ 0.00					
	Ordinary and necessary operating expenses	-\$ 0.00					
	Net monthly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	
7.	Interest, dividends, and royalties			\$	0.00	\$	

				Column A Debtor 1		Column B Debtor 2 or non-filing sp	pouse	
8.	Unemployment compensation			\$	0.00	\$		
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:							
	For you \$	0.0	00_					
0	For your spouse \$ Pension or retirement income. Do not include any arr	acust received that we						
	benefit under the Social Security Act.			\$	0.00	\$		
10.	Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below.	Security Act or paymen manity, or international	ts or	¢.	0.00	e		
	·			Φ	0.00	\$ \$		
	Total amounts from separate pages, if any.		- .	\$	0.00	\$		
			_	Ψ		Ψ		
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total for Column		\$	3,007.00	+ \$ _		= \$	3,007.00
							Total cu	rrent monthly
Part	2: Determine Whether the Means Test Applies to	o You					income	
12.	Calculate your current monthly income for the year.	Follow these steps:						
	12a. Copy your total current monthly income from line 1	1		Cor	oy line 11 h	nere=>	\$	3,007.00
								,
	Multiply by 12 (the number of months in a year)						x 1	
	12b. The result is your annual income for this part of the	e form				12b.	\$3	6,084.00
13.	Calculate the median family income that applies to	you. Follow these step	os:					
	Fill in the state in which you live.	NM						
	Fill in the number of people in your household.	1						
	Fill in the median family income for your state and size					13.	\$4	6,250.00
	To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link spruptcy clerk's office.	pecified	in the sepa	rate instruc	tions		
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1, ch	eck box	1, There is	no presum	nption of abuse).	
	14b.	of page 1, check box 2,	The pr	esumption (of abuse is	determined by	Form 12.	2A-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjury	that the information or	n this st	atement and	d in any atta	achments is tru	ie and co	rrect.
	X /s/ Kyley C. Hernandez							
	Kyley C. Hernandez Signature of Debtor 1							
	Date May 16, 2019							
	MM / DD / YYYY	- 4004 0						
	If you checked line 14a, do NOT fill out or file Form							
	If you checked line 14b, fill out Form 122A-2 and fi	ile it with this form.						

Official Form 122A-1